

EVALUATOR CHECKLIST

for

Alternative Authorization – Teacher to New Certification/Endorsement Candidates
(Pathway 1, Pathway 2 or ABCTE Candidates)

Proficiency of the candidate participating in an alternate route to certification/endorsement must be verified by the building evaluator.

This signed verification checklist must be returned to the Idaho State Department of Education with the appropriate signatures in order for candidates to receive full certification/endorsement. It is the candidate's responsibility to include this form when applying for certification/endorsement.

Candidate Name: _____ Grade/Subject: _____

School/District: _____ Alt. Route: _____
(i.e., pathway 1, 2 or ABCTE)

Evaluator Name: _____ District Role: _____
(i.e., principal, instructional coach...)

Mentors are integral to this process; assisting candidates in formative assessments and completion of requirements/rubrics. However, final evaluations must be conducted by the appropriate administrator responsible for teacher evaluations within the building.

I have observed the candidate's performance and know it to be at an acceptable level. Additionally, I have verified with the mentor that all of the requirements for the certificate/endorsement have been met and the candidate demonstrates proficiency.

Evaluator/Building Administrator – Please Print

Evaluator/Building Administrator – Signature

Date

Acknowledged by:

District Superintendent – Please Print

District Superintendent – Signature

Date